



FH
[REDACTED]

STATE OF WISCONSIN
Division of Hearings and Appeals

In the Matter of

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

DECISION

MNP/156863

PRELIMINARY RECITALS

Pursuant to a petition filed April 12, 2014, under Wis. Stat. § 49.45(5), and Wis. Admin. Code § HA 3.03, to review a decision by the Division of Health Care Access and Accountability in regard to Medical Assistance, a hearing was held on May 29, 2014, at Waukesha, Wisconsin.

The issue for determination is whether the Medicaid program will pay for Viagra/sildenafil/Revatio.

There appeared at that time and place the following persons:

PARTIES IN INTEREST:

Petitioner:

[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]

[REDACTED]

Respondent:

Department of Health Services
1 West Wilson Street, Room 651
Madison, Wisconsin 53703

By: written submission of Lisa Reese
Division of Health Care Access and Accountability
Madison, WI

ADMINISTRATIVE LAW JUDGE:

David D. Fleming
Division of Hearings and Appeals

FINDINGS OF FACT

1. Petitioner (CARES # [REDACTED]) is a resident of Waukesha County. He is certified as eligible for Medicaid and has also been a participant in the IRIS program.
2. This appeal was filed on behalf of Petitioner seeking Medicaid payment for Viagra; generically known as sildenafil. Revatio is an identical drug to Viagra (though online literature indicates that

different dosage strengths are produced for these drugs) and is used to treat certain conditions prevalent with a sickle cell anemia diagnosis.

3. Petitioner is now 31 years of age and was adopted at age 3 months. He was cognitively impaired due to oxygen deprivation. Among other medical problems he is diagnosed with sickle cell anemia.
4. Revatio is a covered drug in the Medicaid program though it is restricted and Medicaid payment must be requested via the prior authorization process. Revatio is covered for diagnosis of primary pulmonary hypertension or chronic pulmonary heart disease.
5. As of the date of this decision (the undersigned did inquire of the Wisconsin Medicaid program) no prior authorization request for Medicaid payment of any drug was on file with the Medicaid program for Petitioner.

DISCUSSION

Revatio is a trade name for sildenafil and used to treat pulmonary arterial hypertension. *See <http://www.revatio.com/>*. Sildenafil can be paid for by the Medicaid program with a diagnosis of either primary pulmonary hypertension or chronic pulmonary heart disease. *See <https://www.forwardhealth.wi.gov/WIPortal/Tab/42/icscontent/provider/mcicaid/pharmacy/resources.htm.spage#>*.

Without one of those diagnosis the Division of Hearings and Appeals has no legal basis or authority to order the requested payment. If Petitioner does not have one of those diagnoses perhaps the IRIS program could be a source of payment.

CONCLUSIONS OF LAW

That the Medicaid program cannot provide payment for Viagra/sildenafil/Revatio absent a diagnosis of primary pulmonary hypertension or chronic pulmonary heart disease.

THEREFORE, it is

ORDERED

That this appeal is dismissed.

REQUEST FOR A REHEARING

This is a final administrative decision. If you think this decision is based on a serious mistake in the facts or the law, you may request a rehearing. You may also ask for a rehearing if you have found new evidence which would change the decision. Your request must explain what mistake the Administrative Law Judge made and why it is important or you must describe your new evidence and tell why you did not have it at your first hearing. If you do not explain these things, your request will have to be denied.

To ask for a rehearing, send a written request to the Division of Hearings and Appeals, P.O. Box 7875, Madison, WI 53707-7875. Send a copy of your request to the other people named in this decision as "PARTIES IN INTEREST." Your request for a rehearing must be received no later than 20 days after the date of the decision. Late requests cannot be granted.

The process for asking for a rehearing is in Wis. Stat. § 227.49. A copy of the statutes can be found at your local library or courthouse.

APPEAL TO COURT

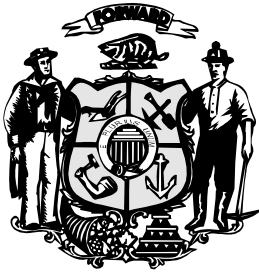
You may also appeal this decision to Circuit Court in the county where you live. Appeals must be served and filed with the appropriate court no more than 30 days after the date of this hearing decision (or 30 days after a denial of rehearing, if you ask for one).

For purposes of appeal to circuit court, the Respondent in this matter is the Department of Health Services. After filing the appeal with the appropriate court, it must be served on the Secretary of that Department, either personally or by certified mail. The address of the Department is: 1 West Wilson Street, Room 651, Madison, Wisconsin 53703. A copy should also be sent to the Division of Hearings and Appeals, 5005 University Avenue, Suite 201, Madison, WI 53705-5400.

The appeal must also be served on the other "PARTIES IN INTEREST" named in this decision. The process for appeals to the Circuit Court is in Wis. Stat. §§ 227.52 and 227.53.

Given under my hand at the City of Milwaukee,
Wisconsin, this 3rd day of July, 2014

\sDavid D. Fleming
Administrative Law Judge
Division of Hearings and Appeals



State of Wisconsin\DIVISION OF HEARINGS AND APPEALS

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The preceding decision was sent to the following parties on July 3, 2014.

Division of Health Care Access and Accountability